

SERIAL NUMBER 09/263,805	FILING DATE 03/08/99	CLASS 399	GROUP ART UNIT 2852	ATTORNEY DOCKET NO. 49733-016
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APPLICANT
YOSHIHIKO HIROTA, TOYOKAWA-SHI, JAPAN; KATSUHIISA TOYAMA, TOYOKAWA-SHI, JAPAN; SHOJI IMAIZUMI, SHINSHIRO-SHI, JAPAN; HIDEYUKI HASHIMOTO, TOYOKAWA-SHI, JAPAN; KAZUHIRO ISHIGURO, TOYOHASHI-SHI, JAPAN.

CONTINUING DOMESTIC DATA***
VERIFIED

JW NONE

371 (NAT'L STAGE) DATA***
VERIFIED

JW NONE

FOREIGN APPLICATIONS***

VERIFIED	JAPAN	10-057025	03/09/98
	JAPAN	11-005120	01/12/99

JW
YES

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 03/29/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY JPX	SHEETS DRAWING 20	TOTAL CLAIMS 57	INDEPENDENT CLAIMS 6
Verified and Acknowledged Examiner's Initials <u>JW</u> Initials _____					

ADDRESS
EDWARD E KUBASIEWICZ
MCDERMOTT WILL & EMERY
600 13TH STREET N W
WASHINGTON DC 20005-3096

TITLE
IMAGE PROCESSING APPARATUS IMAGE FORMING APPARATUS AND COLOR IMAGE
DETERMINATION METHOD THEREOF

FILING FEE RECEIVED \$1,790	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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Bib Data Sheet

CONFIRMATION NO. 2255

SERIAL NUMBER 09/263,805	FILING DATE 03/08/1999 RULE	CLASS 382	GROUP ART UNIT 2623	ATTORNEY DOCKET NO. 49733-016
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APPLICANTS

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 KAZUHIRO ISHIGURO, TOYOHASHI-SHI, JAPAN;

** CONTINUING DATA ***** *IS No*

** FOREIGN APPLICATIONS ***** *IS Yes*

JAPAN 10-057025 03/09/1998
 JAPAN 11-005120 01/12/1999

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 03/29/1999

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY JAPAN	SHEETS DRAWING 20	TOTAL CLAIMS 57	INDEPENDENT CLAIMS 6
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

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TITLE
 IMAGE PROCESSING APPARATUS IMAGE FORMING APPARATUS AND COLOR IMAGE DETERMINATION METHOD THEREOF

<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing)
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